HAWAII ADMINISTRATIVE RULES

TITLE 11

DEPARTMENT OF HEALTH

CHAPTER 101

EXTENDED CARE ADULT RESIDENTIAL CARE HOME

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<u>Historical Note:</u> Chapter 11-101 is based substantially upon chapter 11-301. [Eff 10/28/95; R]

SUBCHAPTER 1

GENERAL REQUIREMENTS

§11-101-1 <u>Purpose.</u> The purpose of this subchapter is to establish a new category of adult residential care homes qualified to serve nursing facility level clients. This subchapter establishes minimum requirements for this new category of homes in order to protect the health, welfare, and safety of residents residing in such homes. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

§11-101-2 <u>Definitions.</u> As used in this chapter: "Abuse" means actual or imminent physical injury, psychological abuse or neglect, financial exploitation, negligent treatment, or maltreatment, as further defined by section 346-222, HRS.

"ACIP" means Advisory Committee of Immunization Practices.

"Adult residential care home" or "ARCH" means any facility providing twenty-four hour living accommodations, for a fee, to adults unrelated to the family, who require at least minimal assistance in the activities of daily living, but who do not need the services of an intermediate care facility. It does not include facilities operated by the federal government. There shall be two types of adult residential care homes:

- (1) Type I home for five or less residents; and $\S11-101-2$
- (2) Type II home for six or more residents. "Advanced directive" means a written declaration in advance (often called a living will) by a competent adult, instructing his or her physician to provide,

withhold or withdraw life-sustaining procedures under certain conditions, such as a terminal condition or where the patient has a permanent loss of ability to communicate with others due to irreversible brain injury or coma.

"Applicant" means an adult residential care home licensee applying for an extended care ARCH license.

"ARCH" means adult residential care home.

"Capable of self-preservation" means having the mental capacity and physical capability, as certified by a physician, to follow instructions to evacuate from an extended care ARCH safely, without any human assistance in emergency situations.

"Care plan" means a written plan developed at the time of admission by the case manager, the resident, and the staff of the extended care ARCH, which incorporates the physician's orders for treatment and medication. The plan shall identify and address resident problems and needs which include, but shall not be limited to, medical, nursing, social, behavioral, recreational, dental, emergency care, nutritional, spiritual, and rehabilitation needs. The plan shall identify proposed solutions, procedures, and services necessary to meet the identified problems or needs of each extended care ARCH resident; identify persons responsible for implementing or facilitating the performance of proposed solutions, procedures, and services; and identify desired outcomes. The plan shall be reviewed regularly and updated by the case manager and the staff of the extended care ARCH.

"Case manager" means an individual other than and not related to the licensee or staff of the extended care ARCH who plans, locates, coordinates, and monitors comprehensive services to meet the individual resident's needs.

"DHS" means the department of human services.

"Department" means the department of health.

"Dietitian" means a person who:

(1) Is registered by the Commission on Dietetic Registration of the American Dietetic Association; or

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(2) Is eligible for such registration.

"Director" means the director of health or the director's designated representative.

"Emergency" means generally, a life-threatening situation such as when the breathing or pulse of a resident stops. It also means those conditions

specific to a resident which are identified in the resident's care plan as requiring emergency care.

"Extended care adult residential care home" or "extended care ARCH" means a category of an adult residential care home qualified to serve nursing facility level residents. There shall be two types of extended care ARCHs:

- (1) Type I home shall consist of five or less residents with no more than two nursing facility level residents; and
- (2) Type II home shall consist of six or more residents with no more than ten per cent of the home's licensed capacity as nursing facility level residents.

"Extended care ARCH resident" means an individual who meets the eligibility requirements of Act 341, SLH 1997, section 4.

"Home health agency" means a public or proprietary agency, a private nonprofit organization, or a subdivision of such agency or organization which is primarily engaged in providing direct or indirect skilled nursing services and other therapeutic services under a physician's direction to homebound patients on a part-time or intermittent basis (in a place used as the individual's home).

"License" means an extended care adult residential care home license.

"Licensed capacity" means the number of residents and specific restrictions, if any, limiting the type of residents permitted in a particular extended care adult residential care home.

"Licensed nurse" means a person who is licensed as a practical nurse (LPN) or a registered professional nurse (RN) in the State of Hawaii pursuant to chapter 457, HRS.

"Licensee" means the person to whom a license to operate an extended care adult residential care home is issued. The licensee may or may not be the primary caregiver of an extended care ARCH.

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"Maluhia extended care adult residential care home" or "Maluhia extended care ARCH" means a category of an extended care adult residential care home under the Maluhia waitlist project.

"Maluhia extended care ARCH resident" means an individual who meets the eligibility requirements of Act 341, SLH 1997, section 4, and has been admitted to a Maluhia extended care ARCH.

"Maluhia waitlist project" or "MWP" means the Medicaid-waivered demonstration project intended to provide care in Maluhia extended care adult residential care homes to individuals determined eligible for services under Act 341, SLH 1997, section 4.

"Modified diet" means a diabetic diet, low fat diet, low sodium diet, or diet otherwise ordered by a physician.

"Nurse aide" means an individual who has completed a nurse aide course in a community college in Hawaii or an individual who completes an equivalent nurse aide course elsewhere and passes an equivalency test approved by the department, or who has had one year of full-time employment as a nurse aide under the supervision of a registered nurse in a hospital, skilled nursing facility, intermediate care facility, or home health agency.

"Nursing facility level of care" means a category of care provided to individuals at acuity level A (formerly intermediate care facility level of care) and acuity level C (formerly skilled nursing facility level of care) as defined in section 17-1737-31.

"Nutritionist" means a person who has completed a master's degree in public health nutrition or nutritional sciences from an accredited university, and is a registered dietitian or is eligible for registration by the Commission on Dietetic Registration of the American Dietetic Association.

"Personal care" means assisting with activities of daily living such as ambulation, mobility, transfer and lifting, positioning and turning, bowel and bladder care, toileting, bathing, dressing, grooming, feeding, exercise, medication assistance, range of motion, and maintenance of health records.

"Physician" means a person who is licensed to practice medicine or osteopathy under chapter 453 or 460, HRS. §11-101-2

"Primary caregiver" means the individual in a Type I extended care adult residential care home who is primarily responsible for providing daily personal care for the residents. In a Type II extended care ARCH, the primary caregiver is a staff member designated by the administrator who is primarily responsible for the daily personal care of the residents.

"Project agreement" means a written agreement between the licensee and the MWP setting forth the terms and responsibilities of the licensee, the primary caregiver, and the MWP in order to provide services to the individuals placed in a Maluhia extended care ARCH by the MWP.

"Registered nurse" means a person who is licensed as a registered nurse (RN) in the State of Hawaii pursuant to chapter 457, HRS.

"Specialized care" means any care need that is identified in the care plan that requires training and monitoring by a registered nurse.

"Staff" means a person authorized to assist the primary caregiver in providing care to extended care ARCH residents.

"Substitute caregiver" means a person who is trained and identified in the care plan to provide daily personal care to residents in the absence of the primary caregiver.

"Universal precautions" means an approach to infection control. According to the concept of universal precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

"Waiver" means an exemption from a specific rule in this chapter which may be granted to an extended care ARCH at the discretion of the director for one year or a specified period not to exceed one year.

Whenever the singular is used in this chapter it may include the plural. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-3 <u>Performance of acts or requirements.</u>
 (a) Whenever any provision under this chapter requires an extended care ARCH to perform certain acts or meet certain requirements, it means that the licensee shall perform the act or meet the requirements provided in this chapter.
- (b) Each provision of the department's current administrative rules on ARCHs applies to an extended care ARCH and extended care ARCH residents. All ARCHs licensed under this chapter shall comply with the requirements provided in this chapter and the requirements provided in the department's current

administrative rules on ARCHs. [Eff]
(Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-4 <u>Waivers</u>. (a) Requests for waivers shall be submitted to the department.
- (b) Requests for waivers shall be denied if the waiver will create a hazard to health or safety.
- (c) A waiver may be renewed at the discretion of the director.
- (d) Waivers granted or issued by the department, whether expressed or implied, shall not be transferred from one licensee to another or from one location to another. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

SUBCHAPTER 2

LICENSING REQUIREMENTS

- §11-101-5 <u>Licensing</u>. (a) The provisions of this chapter shall apply to both Type I and Type II extended care ARCH unless specified otherwise.
- (b) Every applicant for licensure shall submit an application to the department on forms provided by the department. $\S 11-101-5$
- (c) The ARCH shall be licensed as an extended care ARCH prior to admitting extended care ARCH residents.
- (d) Policies and procedures shall be developed by the licensee to meet the provisions of this chapter.
- (e) The license may be renewed at the discretion of the director following annual inspection to determine compliance with this chapter.
- (f) When deficiencies are found in the extended care ARCH during an annual inspection for license renewal, a list of deficiencies shall be presented to the licensee who shall:
 - (1) Provide the department with a plan to correct the deficiencies within ten calendar days from the date of notice; and

- (2) Implement the approved plan of correction.
- (g) A follow-up inspection may be made by the department to determine progress in correcting deficiencies. Failure to demonstrate progress in correcting cited deficiencies based on the plan of correction may result in termination of the license.
- (h) The duration of an extended care ARCH license shall terminate with the ARCH license.
- (i) The following requirements shall apply to applicants seeking licensure to care for residents admitted to a Maluhia extended care ARCH:
 - (1) Eligible applicants authorized by the MWP shall be recommended for licensure to the department by the MWP;
 - (2) The department shall issue a Maluhia extended care ARCH license based on review of recommendations by the MWP;
 - (3) If at any time the licensee, or MWP, terminates the project agreement, the Maluhia extended care ARCH license shall also terminate; and
 - (4) Application forms provided by the MWP shall be submitted to the MWP for review.
- (j) At no time shall the total bed capacity of the extended care ARCH exceed the licensed capacity under the original ARCH license. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-6 Eligibility requirements for licensure.

 (a) Every applicant for an extended care ARCH license shall be licensed as an ARCH pursuant to the department's current administrative rules on ARCHs.
- (b) Applicants shall have a minimum of six months satisfactory experience operating an ARCH.
- (c) Applicants shall be approved by the department to provide modified diets.
- (d) Each ARCH shall be inspected prior to licensure to determine suitability of accommodating residents who are not capable of self-preservation.

321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-7 <u>Minimum structural requirements.</u> (a) The structural requirements for the licensure of ARCHs under the current administrative rules on ARCHs shall be met prior to licensure and at all times during the period of licensure by the department.
- (b) Swimming pools located on extended care ARCH property shall have a solid pool cover with a key lock approved by the department or a fence six feet in height with a key-locked gate which completely encloses the pool. The pool cover shall be locked onto the pool or the gate to the pool shall be locked at all times, unless the pool is being used, in which case, proper supervision of extended care ARCH residents shall be provided to assure resident personal safety.
- (c) Signaling devices used by extended care ARCH residents at bedside, in bathrooms, toilet rooms, and other areas where extended care ARCH residents may be left alone shall be approved by the department. In extended care ARCHs where the primary caregiver and extended care ARCH residents do not reside on the same level or when other signaling mechanisms are deemed inadequate, there shall be an electronic signaling system.
- (d) Every interior door, when locked, shall §11-101-7

permit opening from the outside with the use of a common tool or implement.

- (e) Door locks or other devices shall not be installed to restrict the free movement or use of exits by the extended care ARCH residents.
- (f) There shall be interior stairways in a multi-story structure. [Eff] (Auth: HRS

§§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

§11-101-8 <u>Staffing requirements.</u> (a) The licensee shall provide staff on duty twenty-four hours of each day sufficient and trained to meet the needs of extended care ARCH residents and to carry out the responsibilities based on the extended care ARCH

resident's care plan.

- (b) There shall be sufficient staff to provide services related to the well-being of the resident, such as meal preparation, bed, kitchen, and bathroom cleanliness, general housekeeping, laundry, and essential errands and transportation.
- (c) All staff, including the licensee, shall have a satisfactory history of caring for residents and no history of confirmed abuse, neglect, or misappropriation of funds.
- (d) A registered nurse who is not related to the licensee or staff shall train and monitor primary caregivers and substitutes in providing daily personal and specialized care to residents as needed to implement their care plan.
- (e) Licensees shall submit an acceptable plan explaining how the extended care ARCH shall obtain the services of a registered nurse and case manager.
- (f) Licensees shall submit the name of the trained substitute caregiver.
- (g) A substitute caregiver shall be on the premises in the absence of the primary caregiver.
- (h) Type I extended care ARCHs shall provide a primary caregiver who shall:
 - (1) Reside in the extended care ARCH; and
 - (2) Be a nurse aide or licensed nurse.
 - (i) Type II extended care ARCHs shall provide §11-101-10

primary caregivers who shall be a nurse aide or licensed nurse. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-9 <u>Denial of license application or revocation of existing license</u>. A license application or license may be denied or revoked for reasons which include but are not limited to the following:
 - (1) Failure to meet the requirements of this chapter and current administrative rules governing ARCHs; or
 - (2) Fraudulent or misstatement of facts by the
 applicant; or both. [Eff]
 (Auth: HRS §§321-1, 321-9, 321-10, 321-11,
 321-15.1, 321-15.6; Act 165, SLH 1994; Act
 341, SLH 1997) (Imp: HRS §§321-1, 321-9,

321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

SUBCHAPTER 3

OTHER REQUIREMENTS

- §11-101-10 Admission requirements. (a) Licensees shall admit nursing facility level individuals who meet the eligibility requirements of Act 341, SLH 1997.
- (b) A Type I extended care ARCH shall provide services to no more than two nursing facility level residents at any one time.
- (c) An extended care ARCH resident shall have resided in the resident's own home, a hospital, or other care setting, and shall meet the following requirements:
 - Determined by the department of human services to require care that meets the LOC III care, supervision and assistance that are needed by dependent individuals at the LOC III level who require nursing facility level services and supervision to manage their physical, mental, and social functions;

- (2) Certified for nursing facility (NF) level of care;
- (3) Admitted to a Medicaid waiver program; or
- (4) Be a private paying individual certified by a physician as needing NF level of care.
- (d) Upon admission, the extended care ARCH shall have the following information:
 - (1) A current physician's report on the extended care ARCH resident's physical examination and diagnosis, including mental, functional, and behavioral status;
 - (2) Orders for diet, medication, specialized care, or activities signed by the physician;
 - (3) Evidence of compliance with the department's uniform tuberculosis policy;
 - (4) Evidence of current immunizations for pneumococcal and influenza as recommended by the ACIP; and
 - (5) A written care plan addressing resident
 problems and needs. [Eff]
 (Auth: HRS §§321-1, 321-9, 321-10, 321-11,
 321-15.1, 321-15.6; Act 165, SLH 1994; Act
 341, SLH 1997) (Imp: HRS §§321-1, 321-9,

321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-11 <u>Transfer and discharge of extended care ARCH residents.</u> (a) All transfers and discharges of extended care ARCH residents shall be coordinated with the residents' case managers, residents, and the licensees.
- (b) If the licensee requests transfer of the extended care ARCH resident, a written request stating the reason for the transfer shall first be made to the resident and the resident's case manager no less than thirty days prior to the desired date of transfer.
- (c) Thirty days written notice shall not be required for emergency transfers, discharges, or if mutually agreed upon by resident, licensee, and case manager. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-12 <u>Voluntary closure of an extended care</u>
 <u>ARCH.</u> (a) The licensee shall notify the department in writing at least thirty days prior to any intended
- voluntary closure of an extended care ARCH.
- (b) The licensee shall notify all extended care ARCH residents, guardians, and other responsible agencies at least thirty days prior to an intended voluntary closure of an extended care ARCH.
- (c) All extended care ARCH residents shall be transferred prior to closure. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)
- §11-101-13 Primary caregiver's absence or inability to perform regular duties. (a) Only a substitute caregiver shall take charge of an extended care ARCH during an extended care ARCH primary caregiver's absence or inability to perform regular duties.
- (b) The licensee shall have a written plan approved by the department identifying the duties and

responsibilities of the substitute caregiver.

[Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

§11-101-14 Continuing education. Primary caregivers shall have documented evidence of successful completion of twelve hours of continuing education courses per year on subjects pertinent to the management of an extended care ARCH and care of extended care ARCH residents. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-15 <u>Emergency care of extended care ARCH residents.</u> (a) In case of emergency, the primary caregiver shall promptly call the emergency response system and the resident's physician and case manager.
- (b) Adequate records shall accompany the resident to the emergency room or other medical facility and the primary caregiver shall be available by phone for consultation. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)
- §11-101-16 <u>Fire safety.</u> (a) A Type I extended care ARCH licensed under this chapter shall comply with state and county codes and shall be inspected annually by appropriate fire authorities for compliance.
- (b) Fees for fire inspections shall be the responsibility of the licensee.
- (c) A Type I extended care ARCH shall be in compliance with existing standards for Type I ARCH, chapter 11-100, and the following:
 - (1) Locking devices for room doors shall be readily opened by the occupant from inside the room without the use of a key or special knowledge. Push button locks shall

- automatically pop open upon turning of the doorknob;
- (2) Resident's sleeping room doors shall be self closing;
- (3) Fire drills shall be conducted and documented at least monthly under varied conditions and times of day;
- (4) Fire extinguishers shall be installed in accordance with NFPA 101 Life Safety Code. A minimum fire extinguisher classification rating of 2A10BC is required;
- (5) Hard wired smoke detectors shall be approved by a nationally recognized testing laboratory and all shall be tested at least monthly to assure working order;
- (6) In the residents' area, a hard wired smoke detector shall be located in the hallway outside of the resident sleeping rooms and §11-101-17

also in the living/activity room. Hard wired or battery operated smoke detectors, or both, shall also be located in all resident sleeping rooms; and

- (A) In a one-store structure, a hard wired smoke detector shall separate the extended care ARCH resident area from the caregiver's living area; and
- (B) In a multi-story home, a hard wired smoke detector shall be in the caregiver's living area or hallway outside the sleeping rooms and at the top of the interior stairway landing.
- (d) Type II extended care ARCHs shall be in compliance with the requirements for Group I occupancies as defined in the Uniform Building Code and as detailed in applicable chapters of the NFPA 101 Life Safety Code adopted by reference by the state fire code and respective county fire codes. [Eff]
 (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6, Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)
- §11-101-17 <u>Personal care services.</u> (a) The primary caregiver shall provide daily personal care and specialized care to an extended care ARCH resident as indicated in the care plan.

- (b) The primary caregiver shall, in coordination with the case manager, make arrangements for each extended care ARCH resident to have:
 - (1) Annual physical and dental examinations;
 - (2) Pneumococcal and influenza vaccines following the recommendations of the ACIP; and
 - (3) Visits to the physician every four months or more frequently to ensure adequate medical supervision.
- (c) The primary caregiver shall have twenty-four hour access to a physician. Except for an emergency, whenever the primary caregiver observes a change in the health status of the extended care ARCH resident, the primary caregiver shall promptly notify the resident's physician and case manager. The primary caregiver shall record this action in the extended care ARCH §11-101-17

resident's progress notes. [Eff]
(Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-18 <u>Recreation and social activities.</u> (a) In accordance with the care plan, social and recreational activities shall be arranged or provided for extended care ARCH residents in or outside the home according to the extended care ARCH resident's interests, needs, and capabilities.
- (b) The extended care ARCH resident shall be provided with access to radio, television, and telephone. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)
- §11-101-19 <u>Medications.</u> (a) Injectable medications shall be administered by a licensed nurse, unless physician orders permit an extended care ARCH resident to self-inject. The RN may delegate according to rules established by the Board of Nursing.
- (b) The primary caregiver shall obtain training, relevant information, and regular monitoring from the extended care ARCH resident's physician, a home health agency, or a RN for:

- (1) Any and all specific medication that the extended care ARCH resident requires; and
- (2) Making medications available to extended care ARCH residents.
- (c) Medication errors and drug side effects shall be reported immediately to the resident's physician. The primary caregiver shall document these observations and action taken in the extended care ARCH resident's progress notes.
- (d) Use of physical and chemical restraints shall be by order of physician and shall be reflected in the extended care ARCH resident's care plan. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994;

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341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

§11-101-20 <u>Nutritional requirements.</u> The primary caregiver shall obtain specific instructions and training from a registered nurse, physician, or dietitian regarding special feeding needs of extended care ARCH residents. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

§11-101-21 <u>Records and reports.</u> (a) Extended care ARCH resident records shall be composed of:

- (1) Progress notes which shall include documentation on the extended care ARCH resident's response to medication, treatment, diet, provision of care, and recreational activities; indications of illness, injury, or unusual skin problems; and changes in behavior patterns, including the date, time, and actions taken, if any. Progress notes shall be written monthly or more often, as appropriate;
- (2) Information related to the extended care ARCH resident which shall include:
 - (A) Resident's name, social security number, marital status, date of birth, and sex;

- (B) Next of kin, legal guardian, powers of attorney or other relevant legal documents;
- (C) Religious preference, if any;
- (D) Attending physician, dentist, case manager, and other medical and social service professionals currently involved in providing services to the extended care ARCH resident;
- (E) The agency or person responsible for financial payment;
- (F) The medical insurance plan; and
- (G) Copies of the most recently updated care

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plan and signed physician orders for diet, medications, and treatments for the extended care ARCH resident obtained from the case manager.

- (b) All entries in the extended care ARCH resident's records shall be written in ink, or typewritten, and shall be legible and authenticated by name and title of the individual making the entry.
- (c) Medications made available to extended care ARCH residents shall be recorded for each resident on a flowsheet by the primary caregiver or substitute caregiver. The flowsheet shall contain the extended care resident's name and the frequency, time, date, and by whom the medication was made available to the extended care ARCH resident.
- (d) Upon request by the director or the director's designated representative, the licensee shall provide all records required by this section regarding an extended care ARCH resident. Failure to provide records shall be grounds for revocation of the extended care ARCH license. [Eff]

 (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

§11-101-22 Extended care ARCH resident accounts. No person associated with the ownership or operation of an extended care ARCH shall have power of attorney over any extended care ARCH resident. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165; SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6;

§11-101-23 Physical environment. To ensure privacy, a bedside curtain or screen shall be provided in a room shared by an extended care ARCH resident and another resident. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)

- §11-101-24 <u>Housekeeping.</u> (a) The primary caregiver shall follow appropriate preventive maintenance procedures for equipment and devices used in the care of extended care ARCH residents.
- (b) When necessary, the primary caregiver shall follow universal precautions and proper procedures for disinfecting equipment and devices used in the care of the extended care ARCH residents. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)
- §11-101-25 <u>Extended care ARCH residents' rights.</u> The extended care ARCH resident shall have the right to:
 - (1) Be fully informed, orally and in writing, prior to or at the time of admission, of individual rights and responsibilities and of all rules governing extended care ARCH resident conduct. There shall be documentation that a copy of this document has been received, acknowledged, and signed by the extended care ARCH resident, or the extended care ARCH resident, or both;
 - (2) Be given advance notice of not less than thirty days of transfer or discharges, except when the extended care ARCH resident's health and safety is threatened, in which case, an immediate transfer may be effected through the case manager;
 - (3) Be free from humiliation, harassment, threats, and chemical and physical restraints. Physical and chemical restraints may be used only in an emergency or when necessary to protect the extended care ARCH

- resident from injury to self or to others as reflected in the care plan;
- (4) Have access to a telephone providing privacy;
- (5) Participate in activities of social, religious, health, and community programs at the extended care ARCH resident's discretion, unless medically contraindicated;

- (6) Have flexible daily visiting hours and provisions for privacy established;
- (7) Be free from mental, financial, verbal, sexual, and physical abuse, exploitation, and neglect, and shall be protected from further potential abuse while an investigation is in progress;
- (8) Manage personal funds; and
- (9) Choose a primary physician.

 [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997)
- §11-101-26 <u>Noncompliance with rules.</u> (a) If the department determines that a licensee has failed to comply with any of the requirements of this chapter, the department shall notify the licensee of such non-compliance in writing. In the notice, the department shall cite the specific areas of noncompliance and may do one or more of the following:
 - (1) Approve or disapprove a written plan of correction submitted by the licensee for each citation;
 - (2) Establish a specific time frame for the correction of each citation;
 - (3) Issue a provisional license;
 - (4) Place restrictions on the license;
 - (5) Suspend admissions;
 - (6) Impose fines;
 - (7) Require transfer of extended care ARCH residents;
 - (8) Revoke the license; or
 - (9) Any combination of the above.
- (b) If citations are not corrected within the time specified in the notice or in the accepted plan of correction, the department may do one or more of the

following:

- (1) Issue a provisional license;
- (2) Place restrictions on the license;
- (3) Require transfer of extended care ARCH residents;

- (4) Suspend admissions;
- (5) Impose fines;
- (6) Revoke the license; or
- (7) Any combination of the above.
- (c) Serious and substantive citations which may result in administrative fines, license restriction, or license revocation, or any combination of the above, shall include, but are not limited to:
 - (1) Mental, financial, verbal, sexual, or physical abuse or neglect of an extended care ARCH resident;
 - (2) Misappropriation of extended care ARCH residents' funds or belongings;
 - (3) Absence of the primary caregiver from the extended care ARCH without being replaced by a substitute caregiver;
 - (4) Admitting residents to the home in excess of the licensed capacity as an ARCH and as an extended care ARCH;
 - (5) Failure to properly safeguard all medications;
 - (6) Failure to properly assist with medications;
 - (7) Failure to correct cited deficiencies within the time specified by the department;
 - (8) Failure to practice fire drills;
 - (9) Failure to inform extended care ARCH residents of their rights on or before admission;
 - (10) Violations which threaten the health and safety of the extended care ARCH residents; and
 - (11) Failure to comply with the extended care ARCH resident's care plan.
- (d) Each decision of the department shall become final twenty days after service unless within those twenty days the alleged violator requests in writing a hearing before the director. Upon such request, the director shall specify a time and place for the alleged violator to appear. [Eff] (Auth: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6; Act 165, SLH 1994; Act 341, SLH 1997) (Imp: HRS §§321-1, 321-9, 321-10, 321-11, 321-15.1, 321-15.6, 321-20; Act 165, SLH 1994; Act 341, SLH 1997)

 $\S\S11-101-28$ to 11-101-38 (Reserved).

The Department of Health adopted chapter 101, title 11, Hawaii Administrative Rules, on August 26, 1998, following public hearings on Hawaii on June 15, 1998, on Kauai on June 16, 1998, and on Oahu and Maui on June 18, 1998, after public notice was given in the Honolulu Advertiser on May 13, 1998.

The rules shall take effect ten days after filing with the Office of the Lieutenant Governor.

> LAWRENCE MIIKE Director Department of Health

APPROVED AS TO FORM:

Deputy Attorney General

BENJAMIN J. CAYETANO Governor State of Hawaii

Date:

Filed